



# Medicaid Autism Spectrum Disorder (ASD) Services for Children

## Policy Discussion

1:00 P.M. – 3:00 P.M.

Cannon Building Room 125

March 31, 2015

# Public Input Opportunities



- Meeting today is about DRAFT policy
- Copy of draft policy and today's presentation are listed on Medicaid websites at:
  - [health.utah.gov/ltc/asd](http://health.utah.gov/ltc/asd)
  - [health.utah.gov/autismwaiver](http://health.utah.gov/autismwaiver)
- Options for submitting comments
  - Online, Mail or Fax
- Join listserv on Autism Waiver site
- Medicaid ASD Services Advisory Committee to develop additional procedural/policy detail

# History of Medicaid ASD Coverage Policy



## CMS ASD related services policy

- Historically coverage through HCBS waivers
  - Target populations
  - HCBS waiver eligibility
    - Disregard of parent/family income and assets
  - Capped enrollment
- July 2014 CMS ASD related services guidance
  - Open to all EPSDT (CHEC) eligible clients
  - No caps on enrollment
  - Community Medicaid eligibility rules apply



# Guiding Principles for ASD Services Policy Development

- Medically Necessary Services
  - Appropriate comprehensive assessment and diagnosis
  - Individualized treatment plan
    - Ongoing evaluation of treatment efficacy
- Cost Effective Services
  - Ensure private insurance (if available) is primary payer
  - Develop appropriate reimbursement rates
- Evidence-based, Quality Services
  - Available statewide
- Qualified, Experienced Providers

# Guiding Principles for ASD Services Policy Development



- Encourage parent and family involvement for better outcomes
- Ensure smooth transitions for children served in Medicaid Autism Waiver and their families and providers
- Agency collaboration with stakeholders
  - Public meetings
  - Public comment opportunities
  - Possible development of Medicaid ASD Services Advisory Committee

# Impact on Medicaid Autism Waiver



## Current Medicaid Autism Waiver Clients

- 296 children (2 through 6) currently in services
- Continue waiver until age-out of current enrollees
- Transition from ABA as waiver service to EPSDT (CHEC) service
- Staged Transition
  - Children turning 7 will be evaluated for traditional Medicaid eligibility
  - Transition one provider at a time
- Grandfather initial enrollment requirements
- Medicaid and DSPD staff to work closely with families and providers
- Provider training on prior authorization and billing

# Key Draft Policy Points

## *Eligibility*



- Services Only Available to Traditional Medicaid Clients under 21 (EPSDT Section of State Plan)
- Must meet community Medicaid financial eligibility
- Must have an ASD diagnosis
  - Physician or psychologist to render diagnosis
  - Require use of specific diagnostic tools
    - Autism Diagnostic Interview-Revised (ADI-R)
    - Autism Diagnostic Observation Schedule (ADOS)
    - Autism Diagnostic Observation Schedule, 2<sup>nd</sup> Edition (ADOS-2)
    - Pre-linguistic Autism Diagnostic Observation Schedule (PL-ADOS)



# Key Draft Policy Points

## *Service Delivery*



- Fee-for-Service (FFS) Payment
  - Diagnostic evaluation
  - Applied Behavior Analysis (ABA) services
  - ASD related medical services (PT,OT,ST, etc.) for clients not enrolled in Accountable Care Organizations (ACO)
- ACO – coverage for ASD-related PT, OT, ST etc.
- Prepaid Mental Health Plans (PMHP) – coverage for co-occurring mental health conditions



# Key Draft Policy Issues

## *Provider Qualifications*



- ABA service must be rendered by, or under direction of, BCBA-D or BCBA (Behavior Analyst)
  - Behavior Analysts enrolled in Masters or Doctoral BA Program
    - Details of requirements still to be determined
- Licensed and certified behavioral analysts must design treatment plans and supervise BCaBAs and Technicians
  - State licensing requirement effective fall 2015 (Transition period)
- Registered Behavior Technician
  - As per Behavior Analyst Certification Board (BACB) requirements
  - Transition period for direct service workers currently providing services in Medicaid Autism Waiver and newly hired technicians
- Background check requirements

# Key Draft Policy Issues

## *Behavior Analyst Supervision*



- Provide (direct and indirect) supervision of each child's case that amounts to 10% of the time the child is receiving direct services from a BCaBA or Technician
- Provide direct supervision that involves observing the BCaBA or Technician with the child an average of 50% or more of the monthly supervision required
- Must have knowledge of Technician's ability to implement plan
- Rural Areas (Outside Wasatch Front) may provide supervision to the BCaBA or Technician via HIPAA compliant remote access technology. (Provider responsible to ensure HIPAA compliance)

# Key Draft Policy Points

## ***ABA as Primary Covered Service***

- ABA is a well-developed discipline based on a mature body of scientific knowledge and established standards for evidence-based practice
- ABA is not investigational or experimental
- *National Autism Center's National Standards Report* - treatments categorized as “established”
  - ASD Services Advisory Group to review new treatments
- ABA is an effective treatment for EPSDT-aged clients
  - Types of ABA - Focused and Comprehensive – address different goals based on needs of the child
    - Comprehensive – Example - Early Intensive Behavioral Interventions (EIBI) for young children
  - Adaptive Behavior Treatment - social skills groups

# Key Draft Policy Points

## *Non-Covered Services Examples*



- ABA services rendered when measurable functional improvement is not expected or progress has plateaued
- Services that are investigational, this includes treatments for which the efficacy has not been firmly established by significant empirical study
- Services that are primarily educational in nature
- Services that are vocationally or recreationally-based
- Custodial or respite care services
- Services, supplies, or procedures performed in a non-conventional setting including, but not limited to: resorts; spas; therapeutic programs; and camps
- Time spent by the BCaBA or Technician charting or collecting data that is occurring separate from the time spent documenting direct observations that occur when the provider is working directly with the child
- Provider's time traveling to get to client's home or other community setting
- Transportation of the child



# Key Draft Policy Points

## *Service Settings*

- Services in School-based Settings
  - Only ASD related services identified on an IEP or IFSP may be provided in school-based settings.
  - ASD related services identified on an IEP or IFSP must be provided through the Medicaid School-Based Skills Development Services benefit.
    - With exception of the Behavior Analyst's participation in the child's annual IEP development meeting, the Medicaid agency will not reimburse fee-for-service ABA services in school-based settings that are in addition to services listed on an IEP.
  - If the Behavior Analyst's participation in annual IEP meeting is deemed medically necessary, the provider may bill for this specific service on a fee-for-service basis.

# Key Draft Policy Points

## *Service Settings*

- Services in Home, Community, Clinic or Center-based Settings
  - ABA services can be delivered in a variety of relevant naturally occurring settings in the home and community including targeted settings. Services can also be delivered in clinic or center-based settings.

# Key Draft Policy Points

## *Multiple Provider Coordination*



- Clients can access multiple providers concurrently, particularly for the purpose of receiving services in multiple settings. For example, one provider specializes in center-based services and one provider specializes in in-home services
- In all cases, providers may not subcontract with another ABA provider and may not bill on another provider's behalf
- Providers cannot require a client to receive services from a specific provider for perceived "treatment compatibility" or any other purpose

# Key Draft Policy Points

## *Restrictive Interventions*



- Medicaid agency working on policy details
  - “Restrictive interventions may be necessary on rare occasions with meticulous clinical oversight and controls”
  - ASD Services Advisory Group to assist with policy development



# Key Draft Policy Points

## ***Covered ABA Service Codes***



<b>Code</b>	<b>Service</b>	<b>Provider</b>
0359T	Behavior Identification Assessment (untimed)	BCBA-D or BCBA
0364T	Adaptive Behavior Treatment by Protocol (first 30 minutes)	BCaBA or Technician
0365T	Adaptive Behavior Treatment by Protocol (each (+) 30 min)	BCaBA or Technician
0366T	Group Adaptive Behavior Treatment by Protocol (first 30 minutes)	BCaBA or Technician
0367T	Group Adaptive Behavior Treatment by Protocol (each (+) 30 min)	BCaBA or Technician
0368T	Adaptive Behavior Tx w/ Protocol Modification (first 30 minutes)	BCBA-D or BCBA
0369T	Adaptive Behavior Tx w/ Protocol Modification (each (+) 30 min)	BCBA-D or BCBA
0370T	Family Adaptive Behavior Treatment Guidance (untimed)	BCBA-D or BCBA
0371T	Multiple Family Adaptive Behavior Treatment Guidance (untimed)	BCBA-D or BCBA
0372T	Adaptive Behavior Treatment Social Skills Group (untimed)	BCBA-D or BCBA

# Key Draft Policy Points

## ***ABA Service Limits***

Code	Service	Limits
0359T	Behavior Assessment	1 per Every 180 Days
0364T / 0365T	Treatment by Protocol	20 Hours per Week
0366T / 0367T	Group Treatment by Protocol	2 Hours per Week
0368T / 0369T	Treatment with Protocol Modification	60 Hours per Every 180 Days
0370T / 0371T	Family Treatment Guidance	3 Episodes per Every 180 Days
0372T	Social Skills Group	2 hours per Week

# Key Draft Policy Points

## ***ABA Reimbursement Rates***



Proposed rates are based on rates paid for similar services in the Autism Waiver.

Code	Service	Rate	Rate Type
0359T	Behavior Assessment	\$160.00	Encounter
0364T / 0365T	Treatment by Protocol	\$15.00	30 mins
0366T / 0367T	Group Treatment by Protocol	See Group Rates*	30 mins
0368T / 0369T	Treatment with Protocol Modification	\$40.00	30 mins
0370T	Family Treatment Guidance	\$40.00	Encounter
0371T	Multiple Family Treatment Guidance	See Group Rates*	Encounter
0372T	Social Skills Group	See Group Rates*	Encounter

\*Group rates are based on the modifier billed. Per child reimbursement is reduced when services are offered in groups. See full policy document for groups rates<sub>19</sub>

# Questions & Answers



- Questions ***from*** stakeholders
- Questions ***for*** stakeholders



# Next Steps

- Finalize ASD related services provider manual
- Draft administrative rule
- Update member guide, and EPSDT guide
- Publish parent and family ASD services guide
- Train Medicaid health program representatives, eligibility workers, and customer service staff
- Work with CMS on transition plan for waiver clients
- Complete programming changes for new codes and rates
- Develop specific transition timeframes for individual children, families and providers

# Public Comment Submission



Submit Comments:

Medicaid Websites:

[health.utah.gov/ltc/asd](http://health.utah.gov/ltc/asd)

[health.utah.gov/autismwaiver](http://health.utah.gov/autismwaiver)

Mail: Utah Department of Health

Division of Medicaid and Health Financing

Attn: ASD Services Policy Comments

PO BOX 143112

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Email questions to: [thales@utah.gov](mailto:thales@utah.gov)